AKRON CITY PLANNING COMMISSION LEASE OF CITY-OWNED LAND / RIGHT-OF-WAY FOR MINERAL RIGHTS

REF. SECTIONS 134.25-.28 OF THE CODE OF ORDINANCES OF AKRON, OHIO 2004

The undersigned (circle one) owner / holder of opt property herein involved, does hereby petition for th provided under the Code of Ordinances, Section 13 SUPPORTING II IF ALL THE APPLICABLE PROVISIONS BELOW	e lease of city-owned 4.2528 for purposes NFORMATION V ARE NOT SUPPLII JR UNTIL ALL ITEMS	d land or right-of-way as s set forth below. ED WITH THIS PETITION,
	V ARE NOT SUPPLII JR UNTIL ALL ITEM	•
NORMAL PROCESSING WILL NOT OCCU		S ARE SUBMITTED.
1. The property is addressed as (or has frontage or	າ):	
2. The proposed depth of the well is is:		
3. Attach two (2) sets of plans drawn to scale inclu	ıding:	
ODNR Plat plan Location of property Location of building(s) Dimensions of property and building(s) Parking Access drives Traffic access Loading areas	Landscaping Yards Open space Location of well head	Location of tank battery Signs Utilities
4. If plans were drawn using AutoCAD, please subm Please label the disk with the name of applicant a5. Attach a copy of the lease approved by the Direction	and the site address.	,
description prepared by a registered surveyor.	tor or Fublic Service,	including a legal
6. Attach photographs of the existing site, sufficien	tly labeled.	
 Attach a letter/narrative statement containing: (a) (b) explanation of economic impact and mitigation property; and (c) general compatibility with adjace 	n of noise, glare and	odor effects on adjoining
PRINT / TYPE name of OWNER(S)	PRINT / TYPE name	ofHolder of optionLessee
SIGNATURE:	SIGNATURE:	
Address:	Address:	
City, State:	City, State:	
Zip: Phone:_()	Zip: Pho	one:_(
Email:	Email:	

ALSO NOTIFY:	ALSO NOTIFY:
Relationship to Petitioner (agent, attorney, principal, etc.)	Relationship to Petitioner (agent, attorney, principal, etc.)
PRINT / TYPE	PRINT / TYPE
SIGNATURE:	SIGNATURE:
Address:	Address:
City, State:	City, State:
Zip: Phone:_()	Zip: Phone:_()
Email:	Email:
A NON-REFUNDABLE FILING FEE OF \$250.00 s The Department of Plannin Municipal Building Room 405, 166 S.	
Please make <u>CHECKS PA</u>	AYABLE to City of Akron.
This is to certify that a fee of <u>\$250.00</u> has been rec	eived for investigation incident to this proposal.
Receipt #	
PC – 2018 LE	
	Signature of City Employee
Councilperson Ward	
Councilperson Ward	Signature of City Employee

COUNCIL TIME STAMP

ZONING TIME STAMP

2018

AKRON CITY PLANNING COMMISSION

MEETING	FILE DATE
JANUARY 19, 2018	DECEMBER 15, 2017
FEBRUARY 16, 2018	JANUARY 12, 2018
MARCH 16, 2018	FEBRUARY 9, 2018
APRIL 13, 2018	MARCH 9, 2018
MAY 18, 2018	APRIL 13, 2018
JUNE 15, 2018	MAY 11, 2018
JULY 13, 2018	JUNE 8, 2018
AUGUST 17, 2018	JULY 13, 2018
SEPTEMBER 14, 2018	AUGUST 10, 2018
OCTOBER 19, 2018	SEPTEMBER 14, 2018
NOVEMBER 16, 2018	OCTOBER 12, 2018
DECEMBER 7, 2018	NOVEMBER 2, 2018

In order to become ELIGIBLE for placement on the above meeting dates, the accompanying petition/appeal <u>must</u> meet all of the requirements as listed in the petition/appeal. Submission on or before the file date does not guarantee placement on the corresponding meeting's agenda but enables you to become eligible for the meeting.